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PTO/SB06 (08-03)
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4.

ŀ		PATENT APPLICATION FEE DETERMINATION RE Substitute for Form PTO-875						RECORD Application or Docket Number 10/666.72.8			
		76/2		AIMS AS FILED - PART I		lumn 2)	SMALCENTITY "		'OR'	OTHER THAN SMALL ENTITY	
Γ	\neg	FOR	NUMBI	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
- 1	BAS (37 C	IC FEE CFR 1.16(a))		."				ŧ	OR		.375.00
	TOTAL CLAIMS (37 CFR 1.16(c))		. 3	. minus 20		_	x s=	•	OR	x s=	
f	INDI	PENDENT CLASS		minus 3		_	x \$		OR	x s=	
H		(27 (21 (1.0)(-1))							OR		
ŀ	_								1	81	375.00
	* If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL .	L	OR	TOTAL	D13.00
1		CI	LAIMS AS AM	ENDED	- PART II						
	7.	-13-06	(Calumn 1)	•	(Column 2)	(Column 3)	SMALL E	ENTITY	OR	SMALL	ENTITY
[Α.		CLAIMS - REMAINING -		HIGHEST	PRESENT	RATE ,	ADDI		RATE	ADDI
	ENT		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL . FEE			TIONAL
1	ME	· Total (37 CFR 1,15(c))	1.7	Minus.	- 20	•	x 2/5-	•	OR	x. 500	
	ENDM	Independent (37 CFR 1.16(b))	3	Minus	(3	=	× \$ 1074		OR	x = 100	
	AM	FIRST PRESENT	TATION OF MURTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d)	700		OR	+3	
ŀ							TOTAL		OR	TOTAL	
.							ADO'L FEE	L	J OK	ADO'L FEE	L
- }			(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)		<u> </u>	1		· ·
- }	T 8		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	ENT	Total	AMENDMENT	Minus	PAID FOR		60	FEE	1	- A	FEE
1	NON	CALCULAR 1'18(C)	<u> </u>		<u></u>		×4/2.		OR	× •) (3	
	AME	Independent profit 1,16(6))	<u> </u>	Minus.			×100	<u> </u>	OR	× \$200	
	F	FIRST PRESENT	TATION OF MULTIPL	E DEPENO	BIT CLAIM (37 CF	R 1.16(d))	+5=		OR	+5=	
							TOTAL ADO'L FEE		OR	ADD'L FEE	
			(Column 1)		(Column 2)	(Column 3)			•		
	ပ		CLAIMS		HIGHEST NUMBER	PRESENT	RATE	ADDI-	1	RATE	ADDI-
ı	ENT (REMAINING AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL			TIONAL
	Š	Total (37 CFA 1.16(c))	•	Minus	**	٠	x = 25.		OR	x : 50)=	
1	AMENDM	Independent pr CFR 1,16(b))	1:	Minus	•••	·#	x \$/17}		OR	x:200	
ı	¥	FIRST PRESENT	7.		OR	+ 1 -	·				
							TOTAL ADD'L FEE		OR	TOTAL ADDL FEE	

"If the "Highest Number Previously Paid Fot" IN THIS SPACE is less than 20, least 20.

"If the Trighest Number Previously Paid Fot" IN THIS SPACE is less than 3, enter "5".

The "Highest Number Previously Paid Fot" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.